| Recipient Committee Campaign Statement  (Government Code Sections 84200 - 84216.5)   | ලගම  | \ <b>Y</b> /  | Date Stamp                             |                     |  |
|--|--|---|--|---------------------|--|
| (Government Code Sections 84200 - 84216.5)   |  | U   | hii ir ir                              |                     | orm 460  |
|  |  |   | I have alle                            | اصالہ کے<br>Pa      | age 1 1 of 22  |
|  | Statement covers period  | Date of Election if applicable:   | 1 OCT 08                               | 3 2003              | A For Official Use Only  |
|  | from <u>07/01/2003</u>   | (Month, Day, Year)  | REGISTRAR (                            | OF Var              | ာက္ လူ   |
|  | through 09/30/2003   | 03/02/2004  |  | MM/                 |  |
| 1. Type of Recipient Committee:  |  | 2. Type of State  | ment: 0                                | 1                   |  |
| O Recall O Co<br>O Spr<br>☐ General Purpose Committee<br>O Sponsored ☐ Primal  | Measure Committee marity Formed introlled onsored rily Formed Candidate holder Committee | Pre-election Stater     Semi-annual State     Termination Stater     Amendment (Expla | nent<br>ment<br>nent                   | ☐ Special ☐ Supplen | ly Statement Odd-Year Report nental Pre-election ent - Attach Form 495 |
| 3. Committee Information   | I.D. NUMBER<br>1243639   | Treasurer(s)  |  |                     |  |
| COMMITTEE VAME Bill Campbell for Supervisor  |  | NAME OF TREASURER Barrett Garcia STREETADORESS  |  |                     |  |
| STREET ADDRESS (NO P.O. BCX)   |  | CITY  | STATE                                  | ZIP CODE            | AREA CODE/PHONE  |
|  | CODE AREA CODE/PHONE   | NAME OF ASSISTANT TREASURER, II   | FANT                                   |                     |  |
| SYRCET ADDRESS (IF DIFFERENT) NO AND STREET OR P.O. BOX  |  | STREET ADDRESS  |  |                     |  |
| ,  | CODE AREA CODE/PHONE   | CITY  | STATE                                  | ZIP CODE            | AREA CODE/PHONE  |
| OPTIONAL: FAWE-MAIL ADDRESS ( )  |  | OPTIONAL: FAXIE-MAIL ADDRESS  |  |                     |  |
| 4. Verification  I have used all reasonable diligence in preparing and reasonable diligence in preparing diligence in preparing and reasonable dil | eviewing this statement and to to inder the laws of the State of Ca                      | SIGNATUSE OF TREASURER OR   | rue and correct, ( ASSISTANT TREASURER | >                   |  |

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Recipient Committee Campaign Statement Cover Page - Part 2

| COVE           | R PAGE - F | PART 2 |
|----------------|------------|--------|
| CALIFO<br>FORM | RNIA 4     | 60     |
| Dage           | 2 01       | 22     |

| NAME OF OFFICEHOLDER OF CANDIDATE                  |                        |  | NAME OF BALLOT MEASUR  | E                   |                         |                              |
|--|------------------------|--|------------------------|---------------------|-------------------------|------------------------------|
| Bill Campbell                                      |                        |  |                        |                     |                         |                              |
| OFFICE SOUGHT ON HELD (INCLUDE LOCATION AND DISTRI | ICT NUMBER IF APPLICAB | LE)                                    | BALLOT NO. OF LETTER   | JUR:SOICTION        |                         | TROPPUE                      |
| County Supervisor, District,                       | District 3             |  |                        |                     |                         | OPPOSE                       |
| ESICENTIAUBUSINESS ADDRESS (NO AND STREE*) CIT     | Y 5                    | STATE ZIP CODE                         | identify the controlli | ng officeholder, ce | indidate, or state meas | ure proponent, if any        |
|  |                        |  | NAME OF OFFICEHOLDER,  |                     |                         |                              |
| lelated Committees Not Included in t               | his Statement: /       | ist any committees                     |                        |                     |                         |                              |
| ot included in this consolidated statement that    |                        | •                                      | OFFICE SOUGHT OR HELD  |                     |                         | DISTRICT NO, IF ANY          |
| ormed to receive contributions or to make expe     | enditures on behalf of | your candidacy.                        | •                      |                     |                         |                              |
| OMMITTEE NAME                                      |                        | I.D. NUMBER                            |                        |                     |                         | L                            |
|  |                        | •                                      | 7. Primarily F         | ormed Con           | nmittee                 |                              |
| AME OF TREASURER                                   |                        | CONTROLLED COMMITTEE?                  | NAME OF OFFICEHOLDER   | OF CANDIDATE        | OFFICE SOUGHT OR H      | ELD SUPPOR                   |
|  |                        |  |                        |                     |                         | ☐ OPPOSE                     |
| OMMITTEE ADDRESS STREET ADDRESS (NO.P.O. 80        |                        | *** ********************************** | NAME OF OFFICEHOLDER   | OR CANDIDATE        | OFFICE SOUGHT OF H      |                              |
|  |                        |  |                        |                     | 1                       |                              |
|  |                        |  |                        |                     | ]                       | ☐ oppose                     |
| ITY SIA  | ATE ZIR COCE           | AREA CODE/PHONE                        | NAME OF OFFICEHOLDER   | OR CANDIDATE        | OFFICE SOUGHT OR HI     | CELD SUPPOR                  |
| ITY SI/  | ATE ZIR COCE           | AREA CODE/PHONE                        | NAME OF OFFICEHOLDER   | OR CANDIDATE        | OFFICE SOUGHT OR HI     |                              |
|  | ATE ZIR COCE           |  | NAME OF OFFICEHOLDER O |                     | OFFICE SOUGHT OR HI     | ELD SUPPOR                   |
|  | ATE ZIR COCE           | · · · · · · · · · · · · · · · · · · ·  |                        |                     |                         | ELD SUPPOR                   |
| COMMITTEE NAME                                     |                        | · · · · · · · · · · · · · · · · · · ·  |                        |                     |                         | ELD SUPPOR OPPOSE ELG SUPPOR |
| OMMITTEE NAME                                      |                        | I.D. NUMBER                            |                        |                     |                         | ELD SUPPOR OPPOSE ELG SUPPOR |
| COMMITTEE NAME                                     |                        | I.D. NUMBER                            |                        |                     |                         | ELD SUPPOR OPPOSE ELG SUPPOR |
| COMMITTEE NAME<br>NAME OF TREASURER                |                        | I.D. NUMBER                            |                        |                     |                         | ELD SUPPOR OPPOSE ELG SUPPOR |

## Campaign Disclosure Statement Summary Page

| Statement covers period | Trom \_\_07/01/2003 | CALIFORNIA 460 | CALIFORNI

 NAME CF FILER
 Sill Campbell
 Bill Campbell for Supervisor
 LD. NUMBER

 1243639
 1243639

| Contillation D   |  |                                      | 1243639   |
|--|--|--------------------------------------|---|
| Contributions Received   | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | COLUMN B CALENDAR YEAR TOTAL TO DATE | Calendar Year Summary for Candidates<br>Running in Both the State Primary and |
| Monetary Contributions   | <b>\$</b> 42,525.00                                  | \$ 150,996.00                        | General Elections   |
| 2. Loans Received Schedule B, Line 7                             | 0.00   | 65,000.00                            | 1/1 through 8/30 7/1 to Date  |
| 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2                   | \$ 42,525.00   | \$ 215,996.00                        | 20. Contributions Received \$ ()  |
| 4. Non-monetary Contributions                                    | 0.00   | 3,074.62                             | 21. Expenditures Made 0   |
| 5. TOTAL CONTRIBUTIONS RECEIVED                                  | \$ 42,525.00   | \$ 219,070,62                        |   |
| Expenditures Made  |  |                                      | Expenditure Limit Summary for State   |
| 6. Cash Payments Schedule E, Line 4                              | \$ 17,029,39   | <b>\$</b> 191,163.65                 | Candidates  |
| 7. Loans Made Schedule H, Line 7                                 | 0.00   | 0.00                                 | 22. Cumulative Exenditure Made* (If Subject to Voluntary Expenditure Limit)   |
| 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7                        | \$ 17,029.39   | \$ 191,163.65                        |   |
| 9. Accrued Expenses (Unpaid Bills)                               | 200.00   | 800.00                               | Date of Election Total to Date (mm/dd/yy)                                     |
| 10. Nonmonetary Adjustment                                       | 0.00   | 3,074.62                             | ·   |
| 11. TOTA_ EXPENDITURES MADE Add Lines 8 + 9 + 10                 | \$ 17,229.39   | \$ 195,038.27                        |   |
| Current Cash Statement   |  |                                      |   |
| 12. Beginning Cash Balance Previous Summary Page, Line 16        | \$ 20,276.08   |                                      |   |
| 13. Cash Receipts  | 42,525.00  |                                      |   |
| 14. Miscellaneous Increases to Cash Schedule I, Line 4           | 0.00   |                                      |   |
| 15. Cash Payments Column A, Line 8 above                         | 17,029.39  |                                      |   |
| 16. ENDING CASH BALACK Cines 12 + 13 + 14, then subtract Line 15 | \$ 45,773.69   |                                      |   |
| if this is a Termination Statement, Line 16 must be zero.        |  |                                      |   |
| 17. LOAN GUARANTEES RECEIVED Schedule B, Part 1, Column (b)      | \$0,00   |                                      |   |
| Cash Equivalents and Outstanding Debts                           |  | 1                                    |   |
| 18. Cash Equivalents   | .\$0.00  |                                      |   |
| 19. Outstanding Debts Add Line 2 + Line 9 in Column C above      | · —  |                                      |   |

SCHEDULE A Schedule A Statement covers period CALIFORNIA Monetary Contributions Received FORM 07/01/2003 through 09/30/2003 22 Page. NAME OF FILER Bill Campbell, I.D. NUMBER Bill Campbell for Supervisor 1243639 IF AN INDIVIDUAL, ENTER DATE FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR OCCUPATION AND EMPLOYER AMOUNT RECEIVED CUMULATIVE TO DATE PER ELECTION RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE . OF SELF-EMPLOYED ENTER NAME THIS PERIOD CALENDAR YEAR TO DATE OF BUSINESS) (JAN 1 - DEC 31) (IF REQUIRED) 39/30/2003 ACS State & Local Solutions, Inc. ☐ IND 400,00 400.00 400.00 (P04) COM  $\overline{\mathbb{R}}$ OTH PTY □ scc 29/24/2003 C.F. Amelio **Œ** IND Executive 100.00 100,00 100.00(P04) COM  $\Box$ OTH Sienna PTY SCC 09/24/2003 Mark Anderson Œ MD IND 200.00 200.00 200,00 (P04) □ com OTH Mark Anderson, MD PTY SCC 09/17/2003 Betty & Terrance Barry E IND Secretary 800.00 1,200.00 800.00 (P04) □ сом OTH The Barry Co. PTY ☐ scc 09/30/2003 Michael Blasi President MD IND 200.00 200.00 200.00 (P04) COM ā OTH Chancellor Group ☐ PTY Inc. ☐ scc

SUBTOTAL \$

## Monetary Contributions Summary

- 1. Amount received this period contributions of \$100 or more.
- 2. Amount received this period contributions of less than \$100.
- 3. Total monetary contributions received this period.

1,700.00

NAMEOFFILER Bill Campbell,

SCHEDULE A (cont.)

Statement covers period from  $\frac{07/01/2003}{}$ 

CALIFORNIA / FORM

through 09/30/2003

I.D. NUMBER

| FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR | CONTRIBUTOR   | IF AN INDIVIOUAL, ENTER  |  |   | · · · · · · · · · · · · · · · · · · ·   |
|---|---|--|--|---|---|
| (IF COMMITTEE, ALSO ENTER I.C. NUMBER)                | CODE *  | OCCUPATION AND ÉMPLOYER<br>(F SELF-EMPLOYED ENTER NAME<br>OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD   | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED)  |
| Timothy Busch   | СОМ   | Attorney<br>The Busch Firm   | 250.00   | 250.00  | 250.00 (PC  |
| Butier Engineering Inc.                               | IND COM OTH PTY SCC   |  | 250.00   | 500.00  | 250.00 (P(  |
| CAL SMAC PAC  | IND COM OTH PTY   | ID# 801777   | 400.00   | 900.00  | 400.00 (P0  |
| Barbara Carlsberg                                     | ME IND  COM  OTH  PTY  SCC  | Rancher<br>Hatchet Ranch   | 200.00   | 200.00  | 200.00(P0   |
| Euiwon Chough   | IND COM OTH PTY SCC   | Retired  | 100.00   | 200.00  | 100.00(PC   |
| James Chronley  | ME IND COM OTH PTY SCC  | Retired .  | 100.00   | 300.00  | 100.00(P0   |
|   | Butier Engineering Inc.  CAL SMAC PAC  Barbara Carlsberg  Euiwon Chough | COM  | Butier Engineering Inc.  Butier Engineering In | COM   | COM OTH OTH PTY   Sec   Sec |

Bill Campbell for Supervisor

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

1243639

| The state of the s | ·   |  |  | 1243   |  |
|--|---|--|--|--|--|
| FUL: NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER (ID. NUMBER)  | CONTRIBUTOR<br>CODE *   | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED ENTER NAME<br>OF BUSINESS)   | AMOUNT RECEIVED<br>THIS PERIOD   | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31)  | PER ÉLECTION<br>TO DATE<br>(IF REQUIRED)   |
| Commonwealth Energy Corporation  | IND COM OTH PY SCC  |  | 200.00   | 450.00   | 200.00(  |
| ConAgra Grocery Products Company   | IND COM STHE PTY SCC  |  | 500.00   | 500.00   | 500.00(P   |
| Connor Blake and Griffin LLP   | IND COM OTH PTY SCC   |  | 800,00   | 800.00   | 800.00(P   |
| Cox Communications Inc.  | IND COM OTH PTY SCC   |  | 400.00   | 850,00   | 400.00(P   |
| CR&R Incorporated  | IND COM OTH PTY SCC   |  | 1,400.00   | 1,400.00   | 1,400.00(P   |
| David Recupero & Associates Inc.   | IND COM COM THE OTH STY SCC   |  | 200.00   | 450.00   | 200,00 (P  |
|  | Commonwealth Energy Corporation  ConAgra Grocery Products Company  Connor Blake and Griffin LLP  Cox Communications Inc.  CR&R Incorporated | CODE*  Commonwealth Energy Corporation  IND  COM  Pry  SCC  Connagra Grocery Products Company  IND  Commonwealth Energy Corporation  IND  Commonwealth Energy Corporation | FUEL MAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR  GF CODWITTER ALSO ENTER ADDRESS AND ZIP CODE OF CONTRIBUTOR  COME OF SELF-EMPLOYED ENTER NAME  COME OTH  PTY  SCC  Connagra Grocely Products Company  Common Blake and Griffin LLP  IND  COM  PTY  SCC  Connor Blake and Griffin LLP  IND  COM  PTY  SCC  COX Communications Inc.  IND  COM  PTY  SCC  CR&R Incorporated  David Recupero & Associates Inc.  IND  COM  PTY  SCC  COX FIRMING AND EMPLOYER  COCUNTRIBUTOR  COM  IND  COM  THE  PTY  SCC  COX COMMUNICATION AND EMPLOYER  COCUNTRIBUTOR  COX ONH  IND  COM  THE  PTY  SCC  COX COMMUNICATION AND EMPLOYER  COX ONH  IND  COM  THE  PTY  SCC  COX COMMUNICATION AND EMPLOYER  COX ONH  IND  COM  THE  PTY  SCC  COX COMMUNICATION AND EMPLOYER  COX ONH  IND  COM  THE  PTY  SCC  COX COMMUNICATION AND EMPLOYER  COX ONH  THE  PTY  SCC  COM  THE  PTY  SCC  COX COMMUNICATION AND EMPLOYER  COX ONH  THE  PTY  SCC  COM  THE  PTY  SCC  COX ONH  THE  PTY  SCC  COX ONH  THE  PTY  SCC  THE  THE  COX ONH  THE  PTY  SCC  THE  THE  COX ONH  THE  PTY  SCC  THE  THE  COX ONH  THE  PTY  THE  THE  COX ONH  THE  PTY  THE  THE  COX ONH  THE  PTY  THE  THE  COX ONH  THE  THE  THE  THE  COX ONH  THE  THE  THE  THE  THE  THE  THE  T | Commonwealth Energy Corporation  Commonwealth Energy Corporation | FULL MAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE**  CODE** |

SUBTOTAL \$

3,500.00

|                  | Contributions Received   |                     |   | from07/01                      | /2003                               | CALIFO<br>FORM | <sup>RNIA</sup> 460                      |        |
|------------------|--|---------------------|---|--------------------------------|-------------------------------------|----------------|--|--------|
|                  |  |                     |   | through 09/30                  | /2003                               | Page           | 7 of22                                   |        |
| NAME OF FILER    | Bill Campbell, Bill Campbell for   | Superviso           | )I  |                                |                                     | I.D. NUMB      | ER                                       |        |
|                  |  | <u> </u>            |   |                                |                                     | 12430          | 539                                      |        |
| DATE<br>HECEIVED | FULL NAME STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LC. NUMBER) | CONTRIBUTOR<br>COOE | IF AN INDIVIOUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE<br>CALENDA<br>(JAN 1 - 0 | RYEAH          | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |        |
| 09/17/2003       | Debilio Distributors Inc.  | IND COM OTH PTY     |   | 100.00                         |                                     | 100.00         | 100,00                                   | (P04)  |
| 09/17/2003       | E. Deiss   | IND COM OTH PTY SCC | Retired   | 100.00                         | :                                   | 100.00         | 100.00                                   | (1204) |
| 08/06/2003       | Robert Denk  | IND COM OTH PTY SCC | Construction Radenk Const, Mgmt.  | 100.00                         |                                     | 100.00         | 100.00                                   | (P04)  |
| 09/30/2003       | Doctor's Ambulance Service   | IND COM OTH PTY SCC |   | 200.00                         | 4                                   | 150,00         | 200.00                                   | (P04)  |
| 09/17/2003       | James Doti   | IND COM OTH PTY SCC | President<br>Chapman University   | 100.00                         | 3                                   | .00.00         | 100.00                                   | (P04)  |
| 09/84/2003       | Federal Disposal Service   | IND COM OTH PTY SCC |   | 1,400.00                       | 1,4                                 | 00.00          | 1,400.000                                | 1904)  |
|                  |  |                     | SUBTOTAL \$   | 2,000.00                       |                                     |                |  | :      |

|                  |  |                       |  | The second secon |   |  |       |
|------------------|--|-----------------------|--|--|---|--|-------|
|                  | A (Continuation Sheet)   |                       |  | Statement cover  | CALI  | FORNIA / 60                              | 1     |
| Monetary         | Contributions Received   |                       | •  | from07/01  | L/2003 FOR  |  |       |
|                  |  |                       |  | through 09/30  | 0/2003 Page   | 8 of22                                   |       |
| NAME OF FILER    | Bill Campbell, Bill Campbell for   | Superviso             | ot   | - · · · · · · · · · · · · · · · · · · ·  |   | JMBER                                    |       |
|                  |  | <b>, .</b>            |  |  | 124   | 43639                                    |       |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER IC NUMBER) | CONTRIBUTOR<br>CODE * | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED ENTER NAME<br>OF EUSINESS) | AMOUNT RECEIVED<br>THIS PERIOO   | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |       |
| 09/24/2003       | Michael Finnane  | IND COM OTH PTY SCC   | Pharmacist Infusion Solutions Pharmacy   | 400.00   | 400.00  | 0 400.00                                 | (P04) |
| 09/17/2003       | Fladeboe Automotive Group, Inc.  | IND COM OTH PTY SCC   |  | 200.00   | 200.00  | 200.00                                   | (P04) |
| 09/30/2003       | FLD Interests c/o Fritz Duda<br>Company  | IND COM OTH PTY SCC   |  | 1,400.00   | 1,800.0   | 1,400.00                                 | (P04) |
| 09/24/2003       | Juan Forster   | IND COM OTH PTY SCC   | Consultant<br>Valero Ref. Co.  | 100.00   | 200.00  | 0 100.00                                 | (P04) |
| 05/17/2003       | Warren Fox   | IND COM OTH PTY SCC   | Retired .  | 1,400.00   | 1,800.00  | 1,400.00                                 | (P04) |
| 09/17/2003       | Dennis Certmenian  | IND COM OTH PTY SCC   | CBO<br>Ready PAC Produce   | 200.00   | 450.00  | 200.00                                   | (P07) |
|                  |  | scc                   | SUBTOTAL \$  | 3,700.00   |   |  |       |

SCHEDULE A (cont.) Statement covers period CALIFORNIA FORM from 07/01/2003 through 09/30/2003

Page\_\_ NAME OF FILER Bill Campbell, Bill Campbell for Supervisor I.D. NUMBER 1243639

| DATE<br>RECE VED         | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (#F COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR<br>CODE *      | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER OF SELF-EMPLOYED ENTER NAME OF BUSINESS; | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
|--------------------------|--|----------------------------|--|--------------------------------|---|--|
| 09/24/2003               | Lesslie Giacobbi   | IND COM OTH PTY            | Real Estate<br>Seven Galdes Real<br>Estate   | 200.00                         | 400.00  | 200.00 (P04)                             |
| 09/24/2003               | Genevieve Glancy   | IND COM OTH PTY SCC        | Retired  | 1,400.00                       | 1,800.00  | 1,400.00(P04)                            |
| 09/30/2003               | Health-Link Transportation Corporation   | IND COM OTH PTY SCC        |  | 200.00                         | 400.00  | 200.00(P04)                              |
| 08/10/2003               | John Hilsabeck   | ME IND  COM  OTH  PTY  SCC | Retired  | 100.00                         | 100.00  | 100.00(P04)                              |
| 09/17/2003<br>09/24/2003 |  | IND COM OTH PTY SCC        |  | 800.00<br>200.00               | 1,650.00  | 1,000.00 (P04)                           |
| 09/24/2003               | JAX MARKET   | IND COM OTH PTY SCC        |  | 400.00                         | 400.00  | 400.00 (P04)                             |
|                          |  |                            | SUBTOTAL \$  |                                |   |  |

NAMEOFFILER Bill Campbell,

Statement covers period

california 46

from <u>07/01/2003</u>

Page 10 of

SCHEDULE A (cont.)

through 09/30/2003

D. NUMBER

|                  |  |                        |  |                                |  | 1243639     |        |
|------------------|--|------------------------|--|--------------------------------|--|-------------|--------|
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (F COMMITTEE, ALSO ENTER LD. NUMBER) | CONTRIBUTOR<br>CODE *  | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>IIF SELF-EMPLOYED ENTER NAME<br>OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE TO D<br>CALENDAR YEA<br>(JAN 1 - DEC 31 | R TO DATE   | •      |
| 00/30/2003       | Carl Karcher   | IND COM OTH PTY SCC    | Founder<br>Carl's Jr.  | 800.00                         | 1,150  | .00 800.00  | !(P04) |
| 09/17/2303       | Robert Kleist  | BE IND COM OTH PTY SCC | Executive Printronix, Inc.   | 200.00                         | 400.   | 200.00      | (1904) |
| 09/17/2003       | La Salle Group, Inc.   | IND COM OTH PTY SCC    |  | 100.00                         | 100.   | 00 100.00   | (P04)  |
| 07/09/2003       | Manufactured Housing Education<br>Trust PAC  | IND ED COM OTH PTY     | 1D# 820165   | 500.00                         | 500.   | 500.00      | (₽04)  |
| 09/17/2003       | Linda Marantette   | IND COM OTH PTY        | Homemaker  | 800.00                         | 900.   | 800.00      | (P04)  |
| 09/30/2003       | Medix Ambulance Service  | IND COM OTH PTV SCC    |  | 1,400.00                       | 1,800.   | 00 1,400.00 | (P04)  |
|                  |  |                        | SUBTOTAL \$  | 3.800.00                       |  |             |        |

Bill Campbell for Supervisor

SUBTOTAL \$

3,800.00

| NAME OF FILER        |  |                               |  | unough                         |  |          | 0                                  |
|----------------------|--|-------------------------------|--|--------------------------------|--|----------|------------------------------------|
|                      | Pill Campbell, Bill Campbell for   | Supervie                      | () <b>t</b>  |                                | 1,1  | D. NUMBI |                                    |
| DATE<br>RECEIVED     | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER; | CONTRIBUTOR<br>CODE •         | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED ENTER NAME<br>OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE TO<br>CALENDAR YE<br>(JAN 1 - DEC 3 | AR .     | PER ELECTION TO DATE (IF REQUIRED) |
| 07/01/2003           | Mile Square Golf Course  | IND COM SE OTH PTY SCC        |  | 400.00                         | 400  | 0.00     | 400.00 (P                          |
| 09/24/2003           | Eleanor Moore  | IND COM OTH PTY SCC           | Retired  | 1,400.00                       | 1,800  | .00      | 1,400.00(P                         |
| 09/30/2003           | MRF-Carbon Canyon  | IND COM  COM FTY SCC          |  | 400.00                         | 400  | .00      | 400.00(P0                          |
| <b>09/17/20</b> 03   | Archer Muncy   | IND COM DTH PTY SCC           | Retired  | 200.00                         | 511  | .00      | 200.00(PC                          |
| 09/84/ <b>20</b> 03. | David Noyes  | IND COM OTH PTY SCC           | General Manager<br>Serrano Water<br>District   | 600,00                         | 600  | .00      | 600.00(Pa                          |
| 09/30/2003           | Orange Coast Title Company   | □ IND □ COM ■ OTH □ PTY □ SCC |  | 800.00                         | 800  | .00      | 800.00(PC                          |

SUBTOTAL \$

3,800.00

Bill Campbell,

Bill Campbell for Supervisor

NAME OF FILER

SCHEDULE A (cont.) Statement covers period

from  $\frac{07/01/2003}{}$ 

CALIFORNIA FORM

through 09/30/2003

I.D. NUMBER

| 7   | ·   |  |  | 124  | 13639   |
|---|---|--|--|--|---|
| FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) | CONTRIBUTOR<br>CODE 1   | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED ENTER NAME<br>OF BUSINESS)   | AMOUNT RECEIVED<br>THIS PERIOD   | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31)  | PER ELECTION TO DATE (IF REQUIRED)  |
| Patrick Ortiz   | IND COM OTH PTY   | Contractor Ortiz Enterpries Int.   | 400.00   | 1,050.00   | 400,00 (PC  |
| PacifiCare  | IND COM OTH PTY SCC   | ,  | 200.00   | 600.00   | 200.00(P0   |
| Penhall Company   | IND COM IND OTH PTY SCC   |  | 800.00   | 800.00   | 800.00 (P04   |
| R.J. Noble Company  | IND COM OTH PTY SCC   |  | 400.00   | 400.00   | 400,00 (Po  |
| James Ray   | ME IND  COM  OTH  PTY  SCC  | Real Estate<br>Developer<br>Sanderson J. Ray<br>Development  | 1,400.00   | 1,400.00   | 1,400.00(Pag  |
| Rietsch Enterprises Inc.  | IND COM OTH PTY SCC   |  | 400.00   | 650.00   | 400.00(P04  |
|   | Patrick Ortiz  PacifiCare  Penhall Company  R.J. Noble Company  James Ray | Patrick Ortiz  Patrick Ortiz  Pacificare  Pacificare  Penhall Company  R.J. Noble Company  Pry Scc  R.J. Noble Company  Pry Scc  Rietsch Enterprises Inc.  Patrick Ortiz  IND COM OTH Pry Scc Rietsch Enterprises Inc.  Patrick Ortic  IND COM OTH Pry Scc Rietsch Enterprises Inc.  Patrick Ortic  IND COM OTH Pry Scc Rietsch Enterprises Inc.  Proble Company IND COM OTH Pry Scc | FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE:  (F COMMITTEE ALSO ENTER NAME OF BUSINESS)  Patrick Ortiz    E IND | Patrick Ortiz  Pacificare  Penhall Company  Penhall Company  R.J. Noble Company  R.J. Noble Company  R.J. Noble Company  R.J. Noble Company  Real Estate Developer Scommon Recompany  Real Estate Developer Scommon Recompany  Real Estate Developer Scommon Recompany  Rietsch Enterprises Inc. | FULL NAME STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE:    Patrick Ortiz |

| <b>~</b>         | arm of the many to  |                        |  |                                       |   | TILDULL A (COM.)                         |
|------------------|---|------------------------|--|---------------------------------------|---|--|
|                  | A (Continuation Sheet) Contributions Received   |                        |  | Statement cove                        | TONDA   | DRNIA 460                                |
|                  |   |                        |  | through <u>09/33</u>                  | 1/2003 -  | 13 22                                    |
| NAME OF FILER    | 27.11   |                        |  | through 03/35                         |   |  |
| Trans of Treen   | Bill Campbell, Bill Campbell for  | Supervise              | or<br>-  |                                       | I.D. NUM  |  |
|                  |   |                        | T  | · · · · · · · · · · · · · · · · · · · | 1243  | 639                                      |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR<br>(IF GOMM TITEE ALSO ENTER ! D. NUMBER) | CONTRIBUTOR<br>CODE *  | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER IF SELF-EMPLOYED ENTER NAME OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD        | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31) | PER ELECTION<br>TO DATE<br>(IF REQUIRED) |
| 09/30/2003       | San Juan Investment North, LLC  | IND COM OTH PTY SCC    |  | 1,400.00                              | 1,400.00  | 1,400.00(PO4)                            |
| 09/17/2003       | John Saunders   | IND COM OTH PTY        | Real Estate<br>Investor<br>Saunders Property<br>Co.                                      | 800.00                                | 1,000.00  | 800.00 (PO4)                             |
| 09/24/2003       | Savala Construction Co. Inc.  | IND COM OTH PTY SCC    |  | 1,400.00                              | 1,800.00  | 1,400.00(P04)                            |
| 07/01/2003       | SBC California Employee Political Action Committee  | IND COM OTH PTY SCC    | ID# 981470   | 400.00                                | 400.00  | 400.00 (20%)                             |
| 09/17/2003       | Schaefer Ambulance Service Inc.   | IND COM OTH PTY SCC    |  | 800,00                                | 1,000.00  | 800.00(PC4)                              |
| 09/24/2003       | Ernie Schneider   | ME IND COM OTH PTY SCC | Executive<br>Hunsaker & Assoc.   | 400.00                                | 400.00  | 400.00(P04)                              |
|                  |   |                        | SUBTOTAL \$  | 5,200.00                              |   |  |

|                  | Schedule A (Continuation Sheet)  Monetary Contributions Received                            |                          |  |                                | 172003  | LIFORNIA 460                    |
|------------------|---|--------------------------|--|--------------------------------|---|---------------------------------|
| NAME OF FILER    | Bill Campbell, Bill Campbell for  | Supervis                 | nc   | through 09/30                  | 1. D.   | Je 14 of 22<br>NUMBER<br>243639 |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LO. NUMBER) | CONTRIBUTOR<br>CODE *    | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED ENTER NAME<br>OF DUS NESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE TO DA<br>CALENDAR YEAR<br>(JAN 1 - DEC 31) | ATE PER ELECTION TO DAYE        |
| 39/17/2003       | Michael Schroeder   | IND COM OTH PTY SCC      | Attorney<br>Michael J.<br>Schroeder  | 800.00                         | 800.  | 00 B00.00(P04)                  |
| 09/24/2003       | Eddie Sheldrake   | IND COM OTH PTY SCC      | Owner.<br>Polly's Inc.   | 400.00                         | 400.  | 00 400.00(P04)                  |
| 09/17/2003       | Nabhan Simaan   | IND COM OTH PTY SCC      | Owner<br>Simaan Mobil  | 1,400.00                       | 1,800,  | 1,400.00(P04)                   |
| 09/30/2003       | Society of Certified Senior Advisor   | S IND COM BE OTH PTY SCC |  | 100.00                         | 100.0   | 100.00(P64)                     |
| 09/24/2003       | Geoffrey Stack  | IND COM OTH PTY SCC      | Director<br>Sares-Regis Group  | 1,000.00                       | 1,400.0   | 1,000.00(P04)                   |
| 39/24/2003       | T.D. Service Financial Corp.  Source: Dale Dykema   | IND COM OTH PTY SCC      |  | 400,00                         | 900.0   | 400.00(P04)                     |

SUBTOTAL \$

4,100.00

|                  | A company of the company of   | •                     |   |                                |                                       |           |                                    | <del></del>        |
|------------------|---|-----------------------|---|--------------------------------|---------------------------------------|-----------|------------------------------------|--------------------|
|                  | A (Continuation Sheet) Contributions Received   |                       |   | Statement cover                | rs period                             | CALIFO    |                                    | 50                 |
| wonetary         | Collabutions neceived   |                       | •   | from07/01                      | <u>/2003</u>                          | FORM      |                                    |                    |
|                  |   |                       |   | through 09/30                  | /2003                                 | Page      | 15 of                              | 22                 |
| NAME OF FILER    | $^{ m R}$ Bill Campbell, Bill Campbell for  | Superviso             | or  |                                |                                       | I.D. NUME | ER                                 |                    |
|                  |   |                       |   |                                |                                       | 1243      | 539                                |                    |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (F COMMITTEE ALSO ENTER LD. NUMBER) | CONTRIBUTOR CODE *    | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(F SELF-EMPLOYEO ENTER NAME<br>OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE<br>CALENDAR<br>(JAN 1 - DI | YEAR      | PER ELECT<br>TO DATE<br>(IF REQUIR | £                  |
| 09/30/2003       | Tel Phil Enterprises Inc.   | IND COM COM PTY SCC   |   | 1,400.00                       | 1,4                                   | 00.00     | 1,4                                | 00.00(Po           |
| 09/30/2003       | Daniel Terheggen  | END COM OTH PTY       | President Consolidated Smart Systems  | 800.00                         | 8                                     | 00.00     | 8                                  | 00.00(PG           |
| 08/13/2003       | The Boeing Company  | IND COM THE STY SCC   |   | 750.00                         | 7                                     | 50.00     | 7                                  | 50,00 (P04         |
| 09/30/2003       | The Irvine Company  | IND COM OTH PTY SCC   |   | 200.00                         | 1,6                                   | 00.00     | 2                                  | 00.00 (P04         |
| 09/17/2003       | Totty Enterprises   | IND COM OTH PTY SCC   |   | 1,400.00                       | 1,8                                   | 00.00     | 1,40                               | 0 <b>0.</b> 00(P04 |
| 09/23/2003       | Hans Vogel  | E :ND COM OTH PTY SCC | Retired   | 100.00                         | 1                                     | 00.00     | 1.0                                | DO.00 (P04         |
|                  |   |                       | SUBTOTAL \$   | 4,650.00                       |                                       |           |                                    |                    |

|                  |  |           |  |                                |                                     | SC        | HEDULE                          | A (cont. |
|------------------|--|-----------|--|--------------------------------|-------------------------------------|-----------|---------------------------------|----------|
|                  | A (Continuation Sheet)   |           |  | Statement cove                 | rs period                           | CALIFO    | DRNIA 🗸                         | 60       |
| wonetary         | Contributions Received   |           |  | from07/0                       | 1/2003                              | FORM      |                                 | UU       |
|                  |  |           |  | through <u>09/3</u>            | 0/2003                              | Page      | 16_ af                          | 22       |
| NAME OF FILER    | Bill Campbell, Bill Campbell for   | Superviso | r  |                                |                                     | I.D. NUMI | BER                             |          |
|                  |  |           |  |                                |                                     | 1243      | 639                             |          |
| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (OF COMMITTEE, ALSO ENTER (ID. NUMBER) | CODE •    | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>IIF SELF-EMPLOYED ENTER NAME<br>OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVI<br>CALENDA<br>(JAN 1 - 0 | RYEAR     | PER ELEC<br>TO DAT<br>(IF REQUI | TE       |

| DATE<br>RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (F COMMITTEE, ALSO EN TER LD. NJURGER) | CODE *                 | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>IIF SELF-EMPLOYED ENTER NAME<br>OF BUSINESS) | AMOUNT RECEIVED<br>THIS PERIOD | CUMULATIVE TO DATE<br>CALENDAR YEAR<br>(JAN 1 - DEC 31) | PER ELECTION<br>TO DATÉ<br>(IF REQUIRED) |
|------------------|--|------------------------|--|--------------------------------|---|--|
| 07/10/2003       | Robert Walters   | IND COM OTH PTY SCC    | President<br>Freight<br>Managoment Inc.  | 100.00                         | 100.00  | 100.00(104)                              |
| C9/17/2003       | David Wilson   | IND COM OTH PTY        | Auto Dealer<br>Toyota of Orange  | 1,400.00                       | 1,400.00  | 1,400.00(P04)                            |
| 09/30/2003       | Dorothy Yocca  | HE IND COM OTH PTY SCC | Homemaker  | 200.00                         | 550.00  | 200.00(P04)                              |
|                  |  | IND COM OTH PTY        |  |                                | ·   |  |
|                  |  | IND COM OTH PTY SCC    |  |                                |   |  |
|                  | ,  | ONI OTH PTY SCC        |  |                                |   | :  |
|                  |  |                        | CURTOTAL   |                                |   |  |

SUBTOTAL \$

1,700.00

SCHEDULE B - Part I

| Schedule B - Part I Loans Received  |   |   |                                 | :  | Statement co                                    | vers period                            | CALIFORNI                            | 460   |
|---|---|---|---------------------------------|--|---|--|--------------------------------------|---|
| Loans neceived  |   |   |                                 |  | from07/   | 01/2003                                | FORM                                 | -100  |
|   |   |   |                                 |  | through 09/                                     | 30/2003                                | Page 17                              | of22  |
| NAME OF FILER Bill Campbell,  | Bill Campbell for S   | Supervisor                                    |                                 |  |   |  | I.D. NUMBER                          | - 0.  |
|   | •   | •   |                                 |  |   |  | 1243639                              | j   |
| FULL NAME, STREET ADDRESS AND ZIP CODE<br>OF LENDER<br>(FICOMMITTEE, ALSO ENTER LD, NUMBER) | IF AN INDIVIDUAL, ENTER<br>OCCUPATION AND EMPLOYER<br>(IF SELF-EMPLOYED, ENTER<br>NAME OF BUS NESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c)<br>AMOUNT PAID<br>OA FCRGIVEN<br>THIS PERIOD | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | IPI<br>INTEREST<br>PAID THIS<br>PERIOD | (F)<br>ORIGINAL<br>AMOUNT OF<br>LOAN | (g)<br>CUMULATIVE<br>CONTRIBUTIONS<br>TO DATE |
| Bill Campbell   | Supervisor  |   |                                 | PAID   |   |  |                                      | CALENDAR YEAR                                 |
|   | ` <b> </b>  |   |                                 | s0   | s 10,000  | <u>s, 0.000</u>                        | s 10,000                             | \$ 55,000                                     |
|   | Orange County   |   |                                 | FORGIVEN   |   | RATE                                   |                                      | PER ELECTION                                  |
| IND COV. OTH PTY SCC  |   | s 10,000                                      | \$0                             | \$3  | 12/31/2003<br>DATE DUE                          | \$0                                    | 03/15/2002<br>DATE INCURRED          | s <u>10,000</u> So.                           |
| Bill Campbell (Continued)   |   |   |                                 | PAID   |   | <u> </u>                               | J. T. C. III COTTILES                | CALENDAR YEAR                                 |
|   |   |   | ·                               | <u> </u>   | \$ 35,000                                       | ± € 0,000                              | 35,000                               | s 55,000                                      |
|   | }   |   |                                 | FORGIVEN   |   | RATE                                   |                                      | PER ELECTION                                  |
| □ ило □ сом □ отн □ эту □ soc   |   | \$ 35,000                                     | s <u></u>                       | \$0  | / /<br>DATE DUE                                 | s0                                     | 02/27/2003<br>DATE INCURRED          | <u>\$10,000</u> so                            |
| Bill Campbell (Continued)   |   |   |                                 | PAID   |   |  |                                      | CALENDAR YEAR                                 |
| (Continued)   |   |   |                                 | \$ <u> </u>                                      | \$ 20,000                                       | <u>≈ 0.000</u>                         | s20,000                              | s 55,000                                      |
|   |   |   |                                 | FORGIVEN   |   | RATE                                   |                                      | PER ELECTION                                  |
| INT COM THE PTY SCC   | ·   | s 20,000                                      | \$0                             | s0   | 06/25/2004<br>DATE DUE                          | 5 <u>C</u>                             | 06/26/2003<br>DATE INCURRED          | s 10,000 So                                   |
|   |   | UBTOTAL                                       | 5.00                            | • • • • •  | \$ 65,000.00                                    | ¢                                      |                                      | 1   |
| Schedule B Summary  |   | ODI OTAL                                      | <b>J.CO</b>                     | Ψ 0.00   | # 85,000.30                                     | \$ 0.60                                |                                      |   |
| Loans received this period  |   |   |                                 | \$   | 0.30  |  |                                      |   |
| (Total Column (b) plus initemized l   |   |   |                                 |  | · · · · · · · · · · · · · · · · · · ·           | <del></del>                            |                                      |   |
|   | •   |   |                                 |  |   |  |                                      |   |
| 2. Loans paid or forgiven this period   |   |   |                                 | \$   | C.00  |  |                                      |   |
| (Total Column (c) plus loans unde   | • •   |   |                                 |  |   |  |                                      |   |
| (Include loans paid by a third party  | that are also itemized on   | Schedule A.)                                  |                                 |  |   |  |                                      |   |
| 3. Net change this period. (Subtract I  | ine 2 from Line 1)  |   |                                 | NET \$ _   | 0.00  |  |                                      |   |
| Enter the net here and on the Sum   |   |   | *************                   | 194-1 4 T  |   |  |                                      |   |

| SCH | E LVI | н | = |  |
|-----|-------|---|---|--|

| Out a rem   |                         |                |                          |              |  | SCHEDUL                         |
|---|-------------------------|----------------|--------------------------|--------------|--|---------------------------------|
| Schedule E  |                         |                |                          |              | Statement covers period                      | CALIFORNIA A                    |
| Payments Made   |                         |                |                          |              | from 07/01/2003                              | FORM 410                        |
|   |                         |                |                          |              |  | 1.0                             |
| AME OF FILER Pill Campbell Bill Campbe  | 7.7                     | ····           |                          | ·····        | through 09/30/2003                           | Page 18 of                      |
| AMEOFFICER Fill Campbell, Bill Campbe   | ell for S               | upervis        | sor                      |              |  | I.D. NUMBER                     |
|   |                         | <del></del>    |                          |              | ·····  | 1243639                         |
| CODES: If one of the following codes accurately desc                              | ribes the pay           | /ment, yo      | u may enter the c        | ode. Otherwi | se, describe the payment.                    |                                 |
| MP campaign paraphernalia/misc. NS campaign consultants                           | MBR mem                 |                |                          |              | RAD radio airtime and                        |                                 |
| TB contribution (explain nonmonetary)*  | MTG meet:<br>OFC office |                | pearances                |              | RFD returned contribu<br>SAL campaign worker |                                 |
| VC civic donations  |                         | on circulating | 9                        |              | TEL t.v. or cable airtin                     |                                 |
| L candidate filing/ballot fees  |                         | e banks        | _                        |              | TRC candidate travel                         | lodging and meals (explain)     |
| ND fundra sing events   | POL pollin              | g and surve    | y research               |              | TRS staff/spouse trave                       | el, lodging and meals (explain) |
| ND independent expenditure supporting/opposing others (explain)* EG legal defense |                         |                | and messenger service    |              | TSF transfer between                         | committees of the same candida  |
| IT campaign literature and mailings   |                         |                | ices (legal, accounting) |              | VOT voter registration                       |                                 |
| our parget moratore que manings   | PRT print:              | 1              |                          |              | WEB Information techn                        | iology costs (internel, e-mail) |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)       |                         |                |                          |              |  |                                 |
|   |                         | CODE           | OR                       | DESCRIPTIO   | ON OF PAYMENT                                | AMOUNT PAID                     |
| merican Express   |                         | CINT           |                          |              |  | 393.                            |
|   |                         |                |                          |              |  | j                               |
|   |                         |                |                          |              |  |                                 |
|   |                         |                |                          |              |  |                                 |
|   |                         | <b>!</b>       |                          |              |  |                                 |
| Cingular Wireless   |                         | 070            |                          |              |  |                                 |
| Ingulal wileless  |                         | OFC            |                          |              |  | 388.3                           |
|   |                         |                |                          |              |  |                                 |
|   |                         |                |                          |              |  |                                 |
|   |                         |                |                          |              |  |                                 |
|   |                         |                |                          |              |  |                                 |
| iane Stone & Associates   |                         | CNS            | 5,929.09                 |              |  | 12,388.                         |
|   |                         | FND            | 6,459.78                 |              |  | 1                               |
|   |                         | 1 1            |                          |              |  | İ                               |
|   |                         |                |                          |              |  |                                 |
|   |                         |                |                          |              |  |                                 |
|   |                         |                |                          |              | SUBTO  | TAL \$ 13,170.6                 |
| chedule E Summary   |                         | 200            |                          |              |  |                                 |
| 1. Payments made this period of \$100 or more. (In                                | clude all Sc            | hedule F       | subtotals \              |              |  | <b>\$</b> 17 001                |
| 2. Unitemized payments made this period of under                                  | \$100                   |                |                          |              |  | Ψ <u>17,001.4</u>               |
| 3. Total interest paid this period on outstanding loa                             | ıńs. (Enter a           | ımısııni fr    | om Schedule B            | Part 2 Calus | mn(d) )                                      | \$ <u>27.9</u>                  |
| 4. Total payments made this period. (Add Lines 1,                                 | 2 and 3 Fr              | nter here      | and on the Sum           | mani Paga 7  | Column & Line 6 ) TOT                        |                                 |
|   | د, aاالا ع. الـا        | 1101 H         | and on me onu            | шагу тадө, ч | Jointius A, Line 6.J 101                     | TAL \$ <u>17,029.3</u>          |

| Cohodula C   |  |                 |               |  |  |  | HEDULE E  | (CONT.)               |
|--|--|-----------------|---------------|--|--|--|---|-----------------------|
| Schedule E (Continuation Sheet)  |  |                 |               |  | from07/01/200  | PAND   | ornia 4   | 60                    |
| Payments Made  |  |                 |               |  | through 09/30/200  |  | 19 of   | 22                    |
| NAME OF FILER Bill Campbell, Bill Campbe   | of For S   | Huporvis        | 01            | ······································ | unouge.  | I.D. NU  |   |                       |
|  |  |                 |               |  |  | 1.24   | 3639  |                       |
| CODES: If one of the following codes accurately desc   | ribes the pa   | yment, you      | may enter the | code. Otherwi                          | ise, describe the paymer   | nt.  |   | ·                     |
| CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/baltot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense ITI campaign literature and mailings | MTG mee<br>OFC offic<br>PET petit<br>PHO phor<br>POL potit<br>POS post | essional servic | arances       |  | RAD radio airtime RFD returned coi SAL campaign w TEL t.v. or cable TRC candidate tr TRS staff/spouse TSF transfer bet VOT voter registr WES information | ntributions<br>orkers salaries<br>aintime and prod<br>avel, lodging and<br>travel, lodging a<br>ween committees<br>ation | luction costs<br>i meals (explain<br>ind meals (explain<br>s of the same ca | ain)<br>andidate/spor |
| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(F COMM.TTEE, ALSO ENTER LD, N JMBER  |  | CODE            | OR.           | DECORIDA                               | ON OF DAYWENT  |  |   |                       |
| Barrett Garcia   |  | PRO             | OR            | DESCRIPT                               | ON OF PAYMENT  |  | AMOUNT I  | 65.00                 |
|  |  |                 |               |  | _  |  |   |                       |
| Learning for Life of Orange County   | С  | MTG             |               |  |  |  | 5   | 00.00                 |
| CCAM   | -  | PRT             |               |  |  |  | 5(  | 00.00                 |
| Republican Party of Orange County  |  | MTG             |               |  |  |  | 2!  | 50.00                 |
| ID# 742088   |  |                 |               |  |  |  |   |                       |

SCHEDULE E (CONT.)

| Schedule E           |
|----------------------|
| (Continuation Sheet) |
| Payments <b>Made</b> |

| Statement covers period | FORM | CALIFORNIA 460 | CALIF

1243639

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC divic donations FIL candidate filing/ballot fees FND fundralising events INO independent expenditure supporting/opposing others (explain)* LEG egat detense LIT campaign literature and mailings | MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL potling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads | RAD radio airlime and production costs RFD returned contributions SAL campaign workers salaries TEL t.v. or cable airlime and production costs TRC candidate travel, lodging and meals (explain) TRS staff/spouse travel, lodging and meals (explain) TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail) |
|--|--|--|
|--|--|--|

| NAME AND ADDRESS OF PAYEE OR CREDITOR |          |           |  |             |  |  |  |  |
|---------------------------------------|----------|-----------|--|-------------|--|--|--|--|
| (IF COMMITTEE, ALSO ENTER LO. NUMBER  | CODE     | OA        | DESCRIPTION OF PAYMENT   | AMOUNT PAID |  |  |  |  |
| SBC Pacific Bell                      | OFC      |           |  | 165.78      |  |  |  |  |
|                                       |          |           |  |             |  |  |  |  |
|                                       |          |           |  |             |  |  |  |  |
| Geoffrey Stack                        | RFD      | Return of | 06/20/2003 Contribution  | 400.00      |  |  |  |  |
| •                                     |          |           |  |             |  |  |  |  |
|                                       |          |           |  | •           |  |  |  |  |
| Tustin Police Santa Cop               | CVC      |           | The second secon | 150.00      |  |  |  |  |
|                                       |          |           |  |             |  |  |  |  |
|                                       |          |           |  |             |  |  |  |  |
|                                       |          |           |  |             |  |  |  |  |
|                                       |          |           |  |             |  |  |  |  |
|                                       | İ        |           |  |             |  |  |  |  |
|                                       |          |           |  | -           |  |  |  |  |
|                                       | <u> </u> |           |  |             |  |  |  |  |

| SCH   |       | 111 |   | • |
|-------|-------|-----|---|---|
| VI .F | 11-13 | H   | - | - |

|  |   |   |                                       |   | SCHEDULE F   |  |  |  |
|--|---|---|---------------------------------------|---|--|--|--|--|
| Schedule F<br>Accrued Expenses (Unpaid Bills)  |   | Statement cove  | rs period CALI<br>1/2003              | FORNIA 460  |  |  |  |  |
|  |   |   |                                       |   | 21 . 22  |  |  |  |
|  |   |   | through 09/3                          |   | a  |  |  |  |
| NAMEOFFILER Bill Campbell, Bill Campbell for Supervisor  |   |   |                                       |   | I.D. NUMBER  |  |  |  |
| A-   |   |   |                                       | 124   | 13639  |  |  |  |
| ODES: If one of the following codes accurately described   | ribes the payment, you may  | enter the code. Other   | rwise, describe the p                 | payment.  |  |  |  |  |
| MP campaign paraphemalia/misc.  NS campaign consultants  TB contribution (explain nonmonetary)*  civic donations  LL candidate filing/ballot fees  ND fundraising events  independent expenditure supporting/opposing others (explain)*  EG legal defense  graphic for the candidate filings | MBR member communications MTG meetings and appearance OFC office expenses PET petition circulating PHO phone banks POL polling and survey researc POS postage, delivery and mes PRO professional services (lege PRT print add | RAD radio airtime and production costs RFD returned contributions SAL campaign workers salaries TEL t.v. or cable airtime and production costs TRC candidate travel, todging and meals (explain) TRS staff/spouse travel, lodging and meals (explain) TSF transfer between committees of the same candidate/sp VOT voter registration WEB information technology costs (informet, o mail) |                                       |   |  |  |  |  |
| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER LD. NUMBER  | CODE OR DESCRIPTION OF PAYMENT  | (a)<br>OUTSTANDING<br>BALANCE BEGINNING<br>OF THIS PERIOD   | (b)<br>AMOUNT INCURRED<br>THIS PERIOD | (c)<br>AMOUND PAID<br>THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING<br>BALANCE AT CLOSE<br>OF THIS PERIOD |  |  |  |
| Barrett Garcia   | PRO   | 0.00  | 200.00                                | 0.00  | 200.00   |  |  |  |
|  |   |   |                                       |   |  |  |  |  |
| ea Petersen  | FND   | 600.00  | 0.00                                  | 0.00  | 600.00   |  |  |  |
|  |   |   |                                       |   |  |  |  |  |
| 412-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-   |   |   |                                       |   |  |  |  |  |
|  |   |   |                                       |   |  |  |  |  |
|  | SUBTOTALS   | \$ 600.00   | \$ 200.00                             | \$ 0.00   | \$ 800.00  |  |  |  |
| chedule F Summary  |   |   |                                       |   |  |  |  |  |
| Total accrued expenses incurred this period. (includ accrued expenses of \$100 or more, plus total unitemized.)  | de all Schedule F, Column (b<br>ed accrued expenses under   | ) subtotals for payme<br>\$100.)  | nts for <b>INCUR</b> I                | RED.TOTAL   | \$ 200.00  |  |  |  |
| <ol><li>Total accrued expenses paid this period. (Include a<br/>accrued expenses of \$100 or more, plus total unitemize</li></ol>  | ll Schedule F, Column (c) su  | btotals for   |                                       |   | \$ 0.00  |  |  |  |
| 3. Net change this period. (Subtract Line 2 from Line 1 and on the Summan Page, Column A, Line 9.)   | . Enter the difference here   |   |                                       | NET   | \$ 200.00  |  |  |  |

.

| Schedule G  |   |   |                      |              |   |   |  | SCHE   | DULE G              |
|---|---|---|----------------------|--------------|---|---|--|--|---------------------|
| Payments Made by an Agent or Independent  |   |   | Statement c          | overs period | CALIFORNIA 160                                |   |  |  |                     |
| Contractor (on Behalf of an Officeholder or   |   |   |                      |              | from <u>07</u>                                | /01/2003  | FORM   |  | 44                  |
| NAME OF FILER Bill Campbell Rill Campbell Ser Zugen   |   |   |                      |              | through 09/30/2003                            |   | <br>  Page_  | 22 of  | 22                  |
| NAME OF FILER Bill Campbell, Bill Campbell for Supervisor   |   |   |                      |              |   | I.C. NUMBER   |  |  |                     |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR:  | <del></del>   |   |                      |              |   |   | 124.   | 3639   |                     |
| Diane Stone & Associates  |   |   |                      |              |   |   |  |  |                     |
| CODES: If one of the following codes accurately desc  | cribes the pa   | yment.  | Vou may enter the co | de Othenvis  | e describe th                                 | C neumont   |  |  | ·                   |
| CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic conations candidate filling/ballot tees fundraising events IND independent expenditure supporting/opposing others (explain)* LES legal delense campaign literature and mailings | MTG me<br>OFC offic<br>PET pell<br>PHO pho<br>POL pall<br>POS pos | etings and<br>be expense<br>tion circula-<br>ine banks<br>ing and sui<br>lage, delivi-<br>essional si |                      |              | RFD<br>SAL<br>TEL<br>TRC<br>TRS<br>TSF<br>VOT | radio airtime and returned contribut campaign workers five or cable airtim candidate travel, it staff/spouse trave transfer between ovoter registration information technologies. | ions sealaries e and produ odging and l, lodging an committees | iction costs<br>meals (explain)<br>id meals (explai<br>of the same car | in)<br>ididale/spoi |
| NAME AND ADDRESS OF PAYEE OR CREDITOR<br>(IF COMMITTEE, ALSO ENTER LD, NUMBER   |   |   |                      | - 4          | <del></del> _                                 |   |  | <del></del>  |                     |
| King's Fish House   |   | CODE  | OR                   | DESCRIPTION  | N OF PAYMENT                                  |   |  | AMOUNT P.  | AID                 |
|   |   | FUD   |                      |              |   |   |  | 2.4  | 26.63               |
|   |   |   |                      |              |   |   |  | -  |                     |
|   | <del></del>   |   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   |   |  |  | ,                   |
|   |   |   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   | ,   |  |  |                     |
|   |   |   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   |   |  |  |                     |
|   |   | 1 1   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   |   | İ  |  |                     |
|   |   |   |                      |              |   |   |  |  |                     |
|   |   |   |                      |              |   | SUBTOT  | AL S   | 2,420  | <u> </u>            |